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23370 7590 07/11/2008

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 I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service, with postage paid, and is being transmitted to the Mail Stop **ISSUE FEE** address shown as being transmits transmitted to the USPTO **(571)-273-2885**, on the date indicated below.

**Angela M. Rossi** (Depositor's name)  
**Angela M. Rossi** (Signature)  
**September 5 2008** (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/534,397	05/10/2005	Patrice Martinez	41052/315490	2853

**TITLE OF INVENTION:** STORAGE CASE FOR GOOGLES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0	\$1740	10/14/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
GEHMAN, BRYON P	3728	206-316100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. **Dean W. Russell**  
 2. **Kristin M. Crall**  
 3. **Kilpatrick Stockton LLP**

## **3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)**

**PLEASE NOTE:** Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE (CITY AND STATE OR COUNTRY)

**INTERTECHNIQUE**

**FRANCE**

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private entity ☐ Government

## **4a. The following fee(s) are submitted:**

- ☒ Issue Fee
- ☐ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 10

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- ☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 11-0855 (enclose an extra copy of this form).

## **5. Change in Entity Status (from status indicated above)**

- ☐ a. Applicant claims **SMALL ENTITY** status. See 37 CFR 1.27.
- ☐ b. Applicant is no longer claiming **SMALL ENTITY** status. See 37 CFR 1.27(g)(2).

**NOTE:** The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature Kristin M. Crall

Date September 5, 2008

Typed or printed name Kristin M. Crall

Registration No. 46895

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